GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:4154
ANSWERED ON:11.08.2017
Public Participation in Government Hospitals
Ashok Kumar Shri K.;Gavit Dr. Heena Vijaykumar;Jayavardhan Dr. Jayakumar;Mahadik Shri Dhananjay Bhimrao;Patil Shri Vijaysinh Mohite;Satav Shri Rajeev Shankarrao;Sule Smt. Supriya Sadanand

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Government proposes to promote public participation in the management of Government hospitals;

(b) if so, the details and objectives of the scheme thereof;

(c) the challenges faced by the Government in the implementation of the scheme;

(d) the steps taken by the Government to overcome the difficulties in the implementation of the scheme;

(e) whether there is any improvement in the related indices after the implementation of the scheme;

(f) if so, the State-wise distribution of the related indices; and

(g) whether the Government is undertaking any other policies for promoting the community management of public hospitals and if so, the details thereof?

Answer

ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE
(SHRI FAGGAN SINGH KULASTE)
(a) & (b): 'Public Health and Hospitals' is a State subject. However, support under the National Health Mission (NHM) is being provided to States/ UTs for strengthening of their health care system including for Rogi Kalyan Samitis (RKS)/Patient Welfare Committees (PWC) based on the proposal received from them in their Programme Implementation Plans.
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RKS/ PWC are envisaged to act as a forum to improve the functioning and service provision in public health facilities, increase participation and enhance accountability for provision of better facilities to the patients in the public health facilities at the level of Primary Health Centres and above. The objectives of the RKS/PWC is at Annexure.

(c) & (d): Public Health & Hospitals being a State subject, implementation of NHM including RKS is being done by respective State/ UT Governments. As such no challenges in respect of implementation of RKS schemes has been brought to the notice of this Ministry in the recent past.

(e) & (f): RKS/ PWC are envisaged to act as a forum to improve the functioning and service provision in public health facilities and are not directly linked to health related indices.

(g): The Rogi Kalyan Samiti Guidelines has been revised in 2015 to make the RKS more participatory and accountable. However State have the flexibility to adapt it to State context. Some of the key changes are:

â€¢ Changes in the composition to ensure greater participation of elected representatives.
â€¢ Increased delegation of authority to the Executive Committee and Facility In-charge to be able to timely respond to increased responsibility.
â€¢ While the RKS cannot make regular permanent appointments, it can contract in the services of specialists, Medical/Para medical staff, professional counsellors etc.
â€¢ Implementation of National Quality Assurance Framework and make services patient centric.
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